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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Dock t Number

JA-TES/US 2

First Nam d Inv ntor

Kiyohiko Yamaya

COMPLETE IF KNOWN

Application Number

/

Filing Date

10/23/2003

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method of Processing Sounds from Stringed Instrument and Pickup Device for the Same.

(Title of the *Invention*)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION- Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input type="text"/> OR <input checked="" type="checkbox"/> Correspondence address below			
Name Chauncey Johnson			
Address 14625 Baltimore Avenue #282			
City Laurel	State MD	ZIP 20707	
Country U.S.A.	Telephone (301) 483 - 3300	Fax (301) 483 - 6791	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statement is and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1 00 1 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Yamaya		Family Name or Surname Kiyohiko	
Inventor's Signature <i>Yamaya Kiyohiko</i>		Date, 10/08/03	
Residence: City Kanagawa	State JAPAN	Country JAPAN	Citizenship JAPANESE
Mailing Address 306 Maple Shonandai, 6-3-2 Shonandai, Fujisawa-shi			
City KANAGAWA	State JAPAN	ZIP 252-0804	Country JAPAN
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address 8F 246 Lian-Chen Rd Chung-Ho City			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors are being named on the <input type="checkbox"/> supplemental Additional inventor(s) sheet(s) P PTO/SB/02A attached hereto.			

Please type a plus sign (+) inside this box ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	October 23, 2003
First Named Inventor	KIYOHICO YAMAYA
Title	METHOD OF PROCESSING SOUNDS
Group Art Unit	
Examiner Name	
Attorney Docket Number	JA-TES/US2

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

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Label here

Name	Registration Number
Chauncey Johnson	46,003

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Johnson & Associates, P.C.				
Address					
Address	14625 Baltimore Avenue #282				
City	Laurel	State	MD	Zip	20707
Country	U.S.A.				
Telephone	(301) 483 - 3300	Fax	(301) 483 - 6791		

I am the:

☐ Applicant/ inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	KIYOHICO YAMAYA FOR SONA RESEARCH COMPANY/CORPORATION
Signature	<i>Kiyohiko Yamaya</i>
Date	October 08, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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